

## MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

AL &amp; JOHN

27220041-1

### 1. MONTH OF JANUARY 1, 2009 THRU JANUARY 31, 2009

- |     |  |                                    |                                    |                                      |
|-----|--|------------------------------------|------------------------------------|--------------------------------------|
| 2.  | Is Outlet # (8 digit) Correct?   | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 3.  | Is average Total flow-gal.day stated in space provided?                    | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 4.  | Is max. Total flow-gal day stated in space provided?                       | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 5.  | Is method used to calculate water stated?                                  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 6.  | Are number of working days stated?   | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 7.  | Are there any parameters which have exceeded PVSC Local Limits?            | <input type="radio"/> Y            | <input checked="" type="radio"/> N | N/A                                  |
| 8.  | Is proper compliance/non-compliance statement provided?                    | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 9.  | Have correct number of samples been submitted?                             | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 10. | Has PHC result been listed on MR-1 report?                                 | <input type="radio"/> Y            | <input type="radio"/> N            | <input checked="" type="radio"/> N/A |
| 11. | Has sample number been reported in space provided?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 12. | Have all regulated parameters been listed on MR-1?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 13. | Has sample type been stated on MR-1?                                       | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 14. | Have all samples been taken during this reporting period?                  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 15. | Has NJDEPE certified lab been used?  | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 17. | Have results been written in space designated on MR-1?                     | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 18. | Is correct method used to preserve samples stated on MR-1?                 | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 19. | Has MR-1 been signed by authorized representative?                         | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 20. | Has information been submitted on proper MR-1 form?                        | <input checked="" type="radio"/> Y | <input type="radio"/> N            | N/A                                  |
| 21. | Remove Arsenic from report if sampling not required                        | <input type="radio"/> Y            | <input type="radio"/> N            | <input checked="" type="radio"/> N/A |

c.j.m.

## MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

AL &amp; JOHN

27220041

First Reviewer: comments on deficiencies COMPLETEDate Reviewed 3/12/09 Date sent to user \_\_\_\_\_Date due back \_\_\_\_\_ Reviewer c.j.m.

Second review comments on deficiencies

Date Reviewed \_\_\_\_\_ Date sent to user \_\_\_\_\_

Date due back \_\_\_\_\_ Reviewer \_\_\_\_\_

Date \_\_\_\_\_ Reviewer \_\_\_\_\_

CAVIN

## PRETREATMENT MONITORING REPORT

Name: AL AND JOHN, INC. T/A GLEN ROCK HAMSMailing Address: 444 Marshall Street, Paterson, NJ 07503Facility Location: 444 Marshall Street, Paterson, NJ 07503Category & Subpart: 432Outlet#: 1Contact Official: Louis BarresiTelephone#: 742-4990CUSTOMER ID / OUTLET ID: 27220041-1

MONITORING PERIOD					
1	1	2009	1	31	2009
MON	DAY	YR	MON	DAY	YR
START			END		

	AVERAGE	MAXIMUM
Regulated flow-gal/day	N/A	N/A
Total Flow-gal/day	92,528	111,034
Method Used: Average total flow for Local Limits from incoming purchase water meter, minus 5% evaporation divided by 26 work days in month. Max = Avg + 20%.		

Parameter		Mass or Concentration			No. of Samples	Sample type
		Mon Avg	Maximum	Units		
Zinc	Sample measurement	0.176	N/A	"	1	Comp.
	Permit requirement	1.67	N/A	"		
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					
	Sample measurement					
	Permit requirement					

**PRETREATMENT MONITORING REPORT**

**Certification of Non-use (use additional sheets if necessary)** As per approval by the PVSC, Al & John, Inc. is certifying non-use for Cadmium, Copper, Mercury, Lead and Nickel for this month.

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**Compliance or non-compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used:** Al & John, Inc. was in compliance with the PVSC Local Metal Limits for self monitoring performed during the month and as presented in this report.

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**Explain Method for preserving samples:**

Metal sample was a composite which was preserved with HNO<sub>3</sub> to pH < 2.0. All samples were transferred to the laboratory in an ice filled cooler.

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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988



\_\_\_\_\_  
Signature of Principal  
Executive or Authorized Agent

\_\_\_\_\_  
John Udrija

\_\_\_\_\_  
Plant Manger  
Type Name and Title

\_\_\_\_\_  
2-17-2008  
Date

PVSC Form MR-1 Rev.5 3/91 P2

**AL JOHN, INC. - LOCAL LIMIT MR-1: JANUARY 2009**

READINGS OF CITY METER	26 WORK DAYS IN MONTH
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4,096,310 Present Meter Reading

-3,757,760 Past Meter Reading

338,550 Cubic feet

x7.48

2,532,354 Gallons

x .95 (5% Evaporation)

2,405,736 Gallons discharged this month for Outlet# 27220041-1

**92,528 GPD = AVG. LOCAL LIMIT TOTAL FLOW (#27220041-1)**

26 | 2,405,736 Gallons

92,528

x1.20 (MAX = AVG+20%)**111,034 GPD = MAX. LOCAL LIMIT TOTAL FLOW (#27220041-1)**



## ANALYTICAL DATA REPORT

for  
 Al & John Inc.  
 444 Marshall Street  
 Paterson, NJ 07503

Project Name: PVSC MONITORING  
 Lab Case Number: E09-00093

MDL = METHOD DETECTION LIMIT

&lt; = LESS THAN THE MDL

## Metals

Lab ID: 00093-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 1/6/2009

Time Sampled: 08:00

Date Analyzed: 1/8/09

## Parameter

## Result

## Q

## MDL

Zinc

0.176

0.008

## General Analytical

Lab ID: 00093-001

Client ID: 01

Percent Moisture: 100

Date Sampled: 1/6/2009

Time Sampled: 08:00

## Parameter

## Result

## MDL

## Matrix-Units

## Date Analyzed

Biochemical Oxygen Demand

1540

2.00

Aqueous-mg/L

1/7/2009 8:00

Total Suspended Solids


270

125

Aqueous-mg/L

1/7/2009 12:00

These data have been reviewed and accepted by:

  
 Michael H. Leftin, Ph.D.  
 Laboratory Director

273 Franklin Road  
 Randolph, NJ 07869  
 Phone: 973 361 4252  
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program



## PROJECT INFORMATION

Case No. **E09-00093**Project **PVSC MONITORING**

<b>Customer</b> Al & John Inc.	<b>P.O. #</b>
<b>Contact</b> John Sabo	<b>Received</b> 1/6/2009 14:40
<b>E-Mail</b> ENVIRO43@aol.com <input type="checkbox"/> EMail EDDs	<b>Verbal Due</b> 1/20/2009
<b>Phone</b> (201) 772-6786 <b>Fax</b>	<b>Report Due</b> 1/27/2009
<b>Report To</b>	<b>Bill To</b>
444 Marshall Street	Enviro-Comp
Paterson, NJ 07503	P.O. Box 3457
	Wayne, NJ 07474-3457
Attn: John Sabo	Attn: John Sabo
<b>Report Format</b> <b>Result Only</b>	
<b>Additional Info</b> <input type="checkbox"/> State Form <input type="checkbox"/> Field Sampling <input type="checkbox"/> Conditional VOA	

<u>Lab ID</u>	<u>Client Sample ID</u>	<u>Depth Top / Bottom</u>	<u>Sampling Time</u>	<u>Matrix</u>	<u>Unit</u>	<u># of Containers</u>
00093-001	01	n/a	1/6/2009@08:00	Aqueous	ug/L	2

<u>Sample #</u>	<u>Tests</u>	<u>Status</u>	<u>QA Method</u>
001	Zinc - Zn	In Process	200.8
"	BOD	Run	5210B
"	TSS (Suspended)	Run	2540D



## INTEGRATED ANALYTICAL LABORATORIES, LLC

## SAMPLE RECEIPT VERIFICATION

CASE NO: E 09

00093

CLIENT:

Al + John

COOLER TEMPERATURE: 2° - 6°C: ☒ ( See Chain of Custody)

Comments

COC: COMPLETE / INCOMPLETE  
KEY☒ = YES/NA  
☒ = NO

- ☒ Bottles Intact
- ☒ no-Missing Bottles
- ☒ no-Extra Bottles

- ☒ Sufficient Sample Volume
- ☒ no-headspace/bubbles in VOs
- ☒ Labels intact/correct
- ☒ pH Check (exclude VOs)<sup>1</sup>
- ☒ Correct bottles/preservative
- ☒ Sufficient Holding/Prep Time<sup>1</sup>

☐ Sample to be Subcontracted

<sup>1</sup> All samples with "Analyze Immediately" holding times will be analyzed by this laboratory past the holding time. This includes but is not limited to the following tests: pH, Temperature, Free Residual Chlorine, Total Residual Chlorine, Dissolved Oxygen, Sulfite.

ADDITIONAL COMMENTS:

SAMPLE(S) VERIFIED BY:

INITIAL

DATE

1/6/09

CORRECTIVE ACTION REQUIRED:

YES

☐

(SEE BELOW)

NO

☐

CLIENT NOTIFIED:

YES

☐

Date/ Time:

NO

☐

PROJECT CONTACT:

SUBCONTRACTED LAB:

DATE SHIPPED:

ADDITIONAL COMMENTS:

VERIFIED/TAKEN BY:

INITIAL

DATE

1-7-09

## Laboratory Custody Chronicle

IAL Case No.

**E09-00093**Client Al & John Inc.Project PVSC MONITORINGReceived On 1/ 6/2009@14:40

## Department: Metals

Zinc - Zn

00093-001 Aqueous

Prep. Date

1/ 7/09

Analyst

Lisa

Analysis Date

1/ 8/09

Analyst

Helge

## Department: Wet Chemistry

BOD

-001 Aqueous

Prep. Date

n/a

Analyst

n/a

Analysis Date

1/ 7/09@08:00

Analyst

Kris

TSS (Suspended)

-001 Aqueous

n/a

n/a

1/ 7/09

Kam

Review and Approval:

